




DEVON
Care Homes

**Coronavirus Vaccinations
Care Homes**

COLLABORATIVE

Pre-Vaccination Day - Consent

- Staff – for employment records complete staff consent forms and retain to staff files, draw attention to those who need to be excluded (pregnant, breastfeeding, trying for child, anticoagulants or those with a previous anaphylaxis or epi-pen carrier)
- Residents
 1. Capacity – complete with resident and ideally with a decision specific capacity assessment
 2. No capacity – LPOA in place – get LPOA to sign consent and ensure copy of LPOA available for the day if requested
 3. No capacity – no LPOA but family / representative – get family / representative to sign consent
 4. No capacity – no LPOA and no representative – outstanding practice liaise with IMCA / care funder to advise of plan to complete best interests for vaccination, email would suffice. Liaise with GP re best interests decision. Document decision and those contacted for their opinion

<https://www.gov.uk/government/publications/covid-19-vaccination-consent-form-and-letter-for-adults>

Pre-Vaccination Day – Environment / Administration

- Where to vaccinate – enough space for vaccinators, administrator, resident / staff being vaccinated
- Vaccination areas to be minimalised into smallest number of moves of vaccine once on premises
- Consider tables / clean surface areas for vaccine administration areas where not in the main vaccination location. Close to those bed bound / room dependent
- Table for vaccine storage in the main room (needs to be where it cannot be knocked, i.e. against a wall with chairs positioned around it to reduce risk of knocking)
- Room where vaccine is stored and administered to not be overly hot due to fragility of the vaccine & its storage
- PPE station separate from vaccinating stations, PPE bin for disposal after donning / doffing (Devon every resident / Somerset sessional)
- Administrator table – enough to hold laptop and home consent documents / other in house documentation. Potential for 2-3 administering staff (dependent on size of vaccinating team)
- Separate area for observation post vaccination – large enough to allow social distancing. Ideally close to vaccination area for triage or emergency aid

- Lunch timings
- Shift timings / staff not rostered for vaccination day
- Identify residents into two main cohorts – those who can walk or be brought to the vaccination area and those bed bound or room dependent
- Floor plan – identify residents who are bed bound or room dependent as you will need to cohort staff to be in the same area to use a vial of vaccine for reduced vaccine travel. This will also be visually helpful to the vaccination team on the day – as they will not know your homes
- Stickers and marker pen to mark timings of resident observations
- Identify residents on anticoagulants (need 30 minute observation not 15 minutes), potential expressive behaviour and allergies (notably epi-pen carriers or previous anaphylaxis)
- Notes with the home wifi code to pass to vaccinators on the day
- Clarify that vaccination team will be LFD tested on the day of vaccinating and that they will bring their own PPE
- Co-Ordinator to organise consents into an easy to identify order
- Staff / resident list to check off those who have received vaccination
- Inform families / professionals to suspend visiting and calls as much as possible for the day
- Somerset only – complete the NHS form to reduce work on the day

Pre-Vaccination Day - Staffing

- Consider staff to bring residents to / from the vaccinating area
- Adequate staff to complete observations (training on anaphylaxis identification – flashcards?)
- Additional staff to complete observations of those bed bound or room dependent
- Right skill mix to support expressive residents
- Identify staff into cohorts to ensure they have their 15 minutes post vaccination observation, whilst allowing the home to have sufficient observers for residents still being vaccinated
- Share with staff that the vaccination day will be busy, and they will all have to rally as a team
- Identify a vaccine Co-Ordinator – this needs to be someone who knows residents / staff and the home to keep the flow on the day. Need to know the consent filing to allow quick referencing if needed. Plus, someone strong enough to slow the pace if needed
- Consider staff contingency if staff present with post vaccine symptoms

Vaccination Day

- Have a very large coffee!
- Set up vaccination room
- Pass out anaphylaxis help cards to staff
- All residents to have short sleeved / loose fitting tops – ease of access to vaccinate
- All residents to have temperature taken pre vaccination as baseline
- Be clear on resident flow – list of resident order to vaccinate. Mobile residents first, then bed bound / room dependent
- Have at least 6 residents ready to go at planned time to start, ideally a few in vaccinating area ready to commence a the off!
- Have room plan to hand with cohorted bed bound / room dependent residents and staff in vicinity to complete vaccination vile (6 vaccine administrations per vial)
- Welcome vaccinating team and clarify clear LFD status
- Assess PPE and ensure that they are donned before accessing the building

- Take to vaccinating area, show floor plan, give wifi codes, advise supported by in house Co-Ordinator for fire purposes and orientation (this to be done prior to vaccine being brought onto premises)
- Vaccinating commences!!!!!!
- Label each resident as they are vaccinated with adhesive label with observation start time and finish time (finish 15 minutes for all and 30 minutes for anticoagulant residents), prior to relocation from vaccinating area to observation area
- If resident has a minor reaction amend label for a further 15 minute observations
- Caution – watch the flow they absolutely fly! Care with social distancing / over crowding of observation area. Ensure the observation area moves residents on as they complete their stickered time
- Possible proactive use of paracetamol post vaccination to help with localised pain and possible reaction
- Get vaccination cards for staff
- Document on all resident records administration
- Continue resident observations post vaccination observation time – take obs as needed (temp), triage/escalation protocols up to 48 hour post vaccine



And repeat in 3-12 weeks!!!!!!!